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PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

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(to be used for all correspondence after initial filing)

Application Number	10/720,997		
	Filing Date	November 24, 2003	
	First Named Inventor	Cris PASTO	
	Group Art Unit	3632	
	Examiner Name	BAXTER, GWENDOLYN WRENN	
Total Number of Pages in This Submission	2	Attorney Docket Number	1285-003CIP (PAS-5CIP)

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Mailroom Postcard (1p.); PTO-SB/21/Certificate of Mailing (1p.); PTO/SB/82 (1p.).
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Wall Marjama & Bilinski LLP	Reg. No. 43,473
Signature		
Date	March 16, 2005	

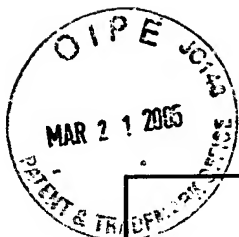
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PTO/SB/82 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035

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**REVOCATION OF POWER OF
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AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/720,997
Filing Date	November 24, 2003
First Named Inventor	Cris PASTO
Art Unit	3632
Examiner Name	BAXTER, GWENDOLYN WRENN
Attorney Docket Number	1285-003CIP (PAS-5CIP)

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: **20874**

☒ Please change the correspondence address for the above-identified application to:

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Cris Pasto		
Signature			
Date	3/14/05	Telephone	607-589-7813

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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